

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Warden J.C. Giles
 Ventress Correctional Facility
 PO Box 767
 Clayton, AL 36016

Cd O 05-427

A. Signature

Linda Jones

Agent
 Addressee

B. Received by (Printed Name)

Linda Jones

C. Date of Delivery

5/12/05

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type

<input checked="" type="checkbox"/> Certified Mail	<input type="checkbox"/> Express Mail
<input type="checkbox"/> Registered	<input checked="" type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Insured Mail	<input type="checkbox"/> C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

2. Article Number
(Transfer from service label)

7004 2510 0001 0150 5474

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1540